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## BIB DATA SHEET

CONFIRMATION NO. 5283

<b>SERIAL NUMBER</b> 09/259,427	<b>FILING or 371(c) DATE</b> 02/26/1999 <b>RULE</b>	<b>CLASS</b> 705	<b>GROUP ART UNIT</b> 3692	<b>ATTORNEY DOCKET NO.</b> 27080	
<b>APPLICANTS</b> MARSHALL A. SLOO, MINNEAPOLIS, MN; ** CONTINUING DATA *****None***** ** FOREIGN APPLICATIONS *****None***** ** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY ** 03/18/1999					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged /NGA B NGUYEN/ Examiner's Signature	<input type="checkbox"/> Met after Allowance NN Initials	<b>STATE OR COUNTRY</b> MN	<b>SHEETS DRAWINGS</b> 2	<b>TOTAL CLAIMS</b> 16 20	<b>INDEPENDENT CLAIMS</b> 1 3
<b>ADDRESS</b> HOVEY WILLIAMS LLP 10801 Mastin Blvd., Suite 1000 Overland Park, KS 66210 UNITED STATES					
<b>TITLE</b> INCIDENT REPORTING SYSTEM AND METHOD					
<b>FILING FEE RECEIVED</b> 445	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		